

3753

TRANSMITTAL OF INFORMATION DISCLOSURE STATEMENT (Under 37 CFR 1.97(b) or 1.97(c))			Docket No. 204.021700	
In Re Application Of: Viraraghavan S. Kumar				
8-22-02 HIS				
Serial No. 10/083,450	Filing Date February 25, 2002	Examiner N/A	Group Art Unit N/A	
<p>Title:</p> <p>Proportional Solenoid-Controlled Fluid Valve Having Compact Pressure-Balancing Armature-Poppet Assembly</p>				
<p>Address to:</p> <p>Assistant Commissioner for Patents Washington, D.C. 20231</p>				
<p>37 CFR 1.97(b)</p> <p>1. <input checked="" type="checkbox"/> The Information Disclosure Statement submitted herewith is being filed within three months of the filing of a national application other than a continued prosecution application under 37 CFR 1.53(d); within three months of the date of entry of the national stage as set forth in 37 CFR 1.491 in an international application; before the mailing of a first Office Action on the merits, or before the mailing of a first Office Action after the filing of a request for continued examination under 37 CFR 1.114.</p>				
<p>37 CFR 1.97(c)</p> <p>2. <input type="checkbox"/> The Information Disclosure Statement submitted herewith is being filed after the period specified in 37 CFR 1.97(b), provided that the Information Disclosure Statement is filed before the mailing date of a Final Action under 37 CFR 1.113, a Notice of Allowance under 37 CFR 1.311, or an Action that otherwise closes prosecution in the application, and is accompanied by one of:</p> <p style="margin-left: 40px;"><input type="checkbox"/> the statement specified in 37 CFR 1.97(e);</p> <p style="text-align: center;">OR</p> <p style="margin-left: 40px;"><input type="checkbox"/> the fee set forth in 37 CFR 1.17(p).</p>				

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Payment of Fee (Only complete if Applicant elects to pay the fee set forth in 37 CFR 1.17(p))		
<input type="checkbox"/> A check in the amount of _____ is attached. <input checked="" type="checkbox"/> The Assistant Commissioner is hereby authorized to charge and credit Deposit Account No. 50-1021 as described below. A duplicate copy of this sheet is enclosed.		
<input type="checkbox"/> Charge the amount of _____ <input checked="" type="checkbox"/> Credit any overpayment. <input checked="" type="checkbox"/> Charge any additional fee required.		
Certificate of Transmission by Facsimile*		Certificate of Mailing by First Class Mail
I certify that this document and authorization to charge deposit account is being facsimile transmitted to the United States Patent and Trademark Office (F)		I certify that this document and fee is being deposited with the U.S. Postal Service as first class mail under 37 C.F.R. 1.8 and is addressed to the Assistant Commissioner for Patents, Washington, D.C. 20231.
_____ (Date)		_____ Signature of Person Mailing Correspondence
_____ Signature		_____ Typed or Printed Name of Person Mailing Certificate
_____ Typed or Printed Name of Person Signing Certificate		
<div style="display: flex; justify-content: space-between;"> <div> <p><small>*This certificate may only be used if paying by deposit account.</small></p> <p><i>[Signature]</i></p> <p>Signature</p> <p>Adana M. Fuierer, Esq. Reg No. P-51,709</p> <p>THE BILICKI LAW FIRM, P.C.</p> <p>Furniture Mart Building, Suite 1000</p> <p>111 West Second Street</p> <p>Jamestown, New York 14701</p> <p>Tel: (716) 664-5600</p> <p>ATTORNEY FOR APPLICANT</p> <p>CC:</p> </div> <div style="text-align: right;"> <p>Dated: 8/15/02</p> </div> </div>		

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